**TABLE 3: WHOLE BLOOD (FINGERSTICK AND VENOUS)**

<table>
<thead>
<tr>
<th>Serum or Plasma Specimens</th>
<th>Total</th>
</tr>
</thead>
<tbody>
<tr>
<td>Positive</td>
<td>77</td>
</tr>
<tr>
<td>Negative</td>
<td>349</td>
</tr>
<tr>
<td>Total</td>
<td>426</td>
</tr>
</tbody>
</table>

**TABLE 4: SERUM OR PLASMA SPECIMENS**

<table>
<thead>
<tr>
<th>Serum or Plasma Specimens</th>
<th>Total</th>
</tr>
</thead>
<tbody>
<tr>
<td>Positive</td>
<td>14</td>
</tr>
<tr>
<td>Negative</td>
<td>130</td>
</tr>
<tr>
<td>Total</td>
<td>144</td>
</tr>
</tbody>
</table>

**REFERENCES**

STEP 1: To expel sample, align the tip of the pipette over the upper area of the Sample Well (S) of the test device and squeeze the bulb.

Note: If a sample does not expel, hold the pipette vertically and place a finger over the vent hole. Then align the pipette tip over the upper area of the Sample Well (S) of the test device and squeeze the bulb.

STEP 2: Remove a test device from its package and place on a flat surface.

STEP 2: Collect the sample using the appropriate sample transfer pipette according to the volume of sample required.

For whole blood samples, use the 25 µL (red line) sample transfer pipette. For serum/plasma samples, use the 10 µL (black line) sample transfer pipette. Follow the directions for sampling using the sample transfer pipette.

STEP 3: Add 20 μL drops of Developer Solution into the lower area of the Sample Well (S).

STEP 4: Read the results at 8 minutes. Do not read test after 15 minutes.

**INTERPRETATION OF RESULTS**

**POSITIVE** One or more colored horizontal bands at each of the Test position (T) and at the Control position (C) indicates that IM-specific heterophile antibodies have been detected.

**NEGATIVE** One pink-purple colored horizontal band at the Control position (C), with no distinct colored horizontal band at the Test position (T) indicates that the faint background color, indicates the IM-specific heterophile antibodies have not been detected.

**INVALID** A distinct colored horizontal band at the Control position (C) should always appear. The Test position (T) should not have any clinical symptoms or hematological evidence of IM. In case of delay or no appearance of the Test position (T) band forms at the Control position (C).

**QUALITY CONTROL**

There are two internal control features in McKesson Consult™ Mononucleosis Cassette Test. A colored control band will always appear at the Control position (C) if the test has been performed correctly and if the device is working properly. This is considered an internal positive procedural control. A clear background in the result window is considered an internal negative procedural control. If the test has been performed correctly, the McKesson Consult™ Mononucleosis Cassette Test is working properly, the background in the result window will be clear, providing a distinct result.

**PROCEDURE**

**PROCEDURAL NOTES** The test protocol must be followed in order to achieve optimal test reactivity with specimens. Follow the assay procedure and always perform the test under carefully controlled conditions.

**Pre-testing**

- Make sure to keep McKesson Consult™ Mononucleosis Cassette Test devices, reagents and samples to equilibrate to room temperature before testing.

- The McKesson Consult™ Mononucleosis Cassette Test device should remain in the sealed pouch prior to testing.

- Do not reuse a lanost.

**To avoid cross-contamination, use a new, disposable sample transfer pipette for each specimen.**

**To label the device with the patient’s name and number control**

**When collecting fingerstick blood, allow a free flow drop to form.**

**To avoid contamination, do not touch the tip of the Developer Solution dropper bottle to skin or McKesson Consult™ Mononucleosis Cassette Test device.**

**Use accepted microbiological practices for proper disposal of potentially infectious test materials and disinfection of contaminated equipment.**

**After testing, dispose of McKesson Consult™ Mononucleosis Cassette Test devices, sample**

**DIRECTIONS FOR USE OF SAMPLE TRANSFER PIPETTE**

- Fingerstick

- Venous Blood

**Waiver samples**

- Plasma

**Total**

<table>
<thead>
<tr>
<th>Site</th>
<th>Fingerstick Blood Positive</th>
<th>Venous Whole Blood Positive</th>
<th>Serum/ Plasma Positive</th>
<th>Total</th>
</tr>
</thead>
<tbody>
<tr>
<td>POL No. 1</td>
<td>0</td>
<td>50</td>
<td>0</td>
<td>50</td>
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<tr>
<td>POL No. 2</td>
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<tr>
<td>Reference Lab</td>
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<tr>
<td>In-hosse</td>
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<td>27</td>
<td>54</td>
<td></td>
</tr>
<tr>
<td>Total</td>
<td>152</td>
<td>280</td>
<td>144</td>
<td>576</td>
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</tbody>
</table>